

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10702315

FILING DATE

APPLICANT(S)

8-1-06

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
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TOTAL IND.	4		4												
TOTAL DEP.	49		47												
TOTAL CLAIMS	51		51												
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